



DOCKET NO. H0498.70170US00

### DECLARATION FOR PATENT APPLICATION

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe the named inventor(s) to be the original and first inventor(s) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

#### METHOD AND APPARATUS FOR MEASURE OF SULFATE

the specification of which:

☐ is attached hereto;

☒ was filed on July 1, 2003, as U.S. Patent Application Serial No. 10/611,416, Confirmation No. 1935, bearing attorney docket No. H0498.70170US00.

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to the examination of this application in accordance with Title 37, Code of Federal Regulations, §1.56.

I hereby claim foreign priority benefits under Title 35, United States Code, §§119(a)-(d) or §365(b) of any foreign application(s) for patent or inventor's certificate, or section 356(a) of any PCT international application designating at least one country other than the United States listed below, and have also identified below any foreign application for patent or inventor's certificate or PCT international application having a filing date before that of the application on which priority is claimed:

	Priority Claimed	Certified Copy Attached?
	YES NO	YES NO
<u>US02/00047</u> (Number)	<u>PCT</u> (Country-if PCT, so indicate)	<u>02/01/02</u> (DD/MM/YY Filed)
	<input checked="" type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input checked="" type="checkbox"/>

I hereby claim the benefit under Title 35, United States Code, §119(e) of any United States provisional application(s) listed below:

<u>60/259,350</u> (Application Number)	<u>01/02/01</u> (filing date)
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The undersigned hereby appoints the following attorney(s) and/or agent(s) to prosecute this application and all related divisional, continuing, substitute, renewal, reissue, re-exam, and to conduct all business in the Patent and Trademark Office connected therewith:

☒ Practitioners at Customer Number:

23628

**AND**

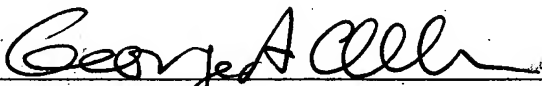
☐ Practitioner(s) named below:

Name	Registration Number

☒ Direct all correspondence to the above-mentioned customer number

Address all telephone calls to Timothy J. Oyer, Ph.D. at telephone no. (617) 720-3500.

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.



12/26/03

**Inventor's signature**

**Date**

Full name of first or joint inventor: George Allen  
Citizenship: United States of America  
Residence: 27 Bay View Avenue  
Swampscott, Massachusetts 01907  
Post Office Address: 27 Bay View Avenue  
Swampscott, Massachusetts 01907

**Inventor's signature**

**Date**

Full name of second joint inventor: David Harrison  
Citizenship: Great Britain  
Residence: 33 Old Orchard, Haxby  
YO32 3DS York, United Kingdom  
Post Office Address: 33 Old Orchard, Haxby  
YO32 3DS York, United Kingdom



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**Inventor's signature**

**Date**

Full name of first or joint inventor: George Allen  
Citizenship: United States of America  
Residence: 27 Bay View Avenue  
Swampscott, Massachusetts 01907  
Post Office Address: 27 Bay View Avenue  
Swampscott, Massachusetts 01907

*D Harrison*

12 / 17 / 2003

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**Inventor's signature**

**Date**

Full name of second joint inventor: David Harrison  
Citizenship: Great Britain  
Residence: 33 Old Orchard, Haxby  
YO32 3DS York, United Kingdom  
Post Office Address: 33 Old Orchard, Haxby  
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